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B1 (Official Form 1)(04/13)				oannon		90 ± 0.					
		United So		Bankı Distric						Vol	untary	Petition
Name of Debtor (if in Gualtieri, Susa		er Last, First,	Middle):			Name	of Joint De	ebtor (Spouse)) (Last, First	, Middle):		
All Other Names used (include married, mai	l by the Debte den, and trade	or in the last 8 e names):	years					used by the J maiden, and			3 years	
Last four digits of Soc (if more than one, state all) xxx-xx-3616					plete EIN	(if more	than one, state	all)		1 2	, ,	o./Complete EIN
Street Address of Deb 6643 Brixton Pa Columbus, OH	•		na State)	:	ZIP Cod		Address of	Joint Debtor	(No. and Su	reet, City, a	ind State):	ZIP Code
County of Residence Franklin	or of the Prin	cipal Place of	Business		43235		y of Reside	ence or of the	Principal Pla	ace of Busi	ness:	
Mailing Address of D	ebtor (if diffe	erent from stre	et addres	s):		Mailir	ig Address	of Joint Debte	or (if differe	nt from stre	eet address):	
				Г	ZIP Cod	e						ZIP Code
Location of Principal (if different from street)	Assets of Buset address abo	siness Debtor ove):										
Type (Form of Organiz	of Debtor	one boy)			of Busines	s			of Bankrup Petition is Fi		Under Whic	ch
Individual (includ See Exhibit D on pa, □ Corporation (inclu □ Partnership □ Other (If debtor is reheck this box and s	es Joint Debtige 2 of this formates LLC and not one of the a	ors) n. LLP) bove entities,	Sing in 1: Rail: Stoc	Ith Care Bu gle Asset Re 1 U.S.C. § road kbroker nmodity Bro iring Bank	siness val Estate a 101 (51B)	as defined	☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt	er 7 er 9 er 11 er 12	☐ Cl of ☐ Cl	hapter 15 P a Foreign hapter 15 P	etition for R Main Procee etition for R Nonmain Pro	eding ecognition
· ·	r 15 Debtors		Othe		mpt Entit	v				e of Debts k one box)		
Country of debtor's cent Each country in which a by, regarding, or agains	foreign proces	eding	unde	(Check box or is a tax-ex r Title 26 of the Interna	, if applicable applicable application app	ble) ization States	defined	are primarily co d in 11 U.S.C. § ed by an indivi- onal, family, or l	101(8) as dual primarily	for		are primarily ess debts.
Full Filing Fee attack Filing Fee to be paid attach signed applicate debtor is unable to p Form 3A.	ned in installments	urt's considerati	individuals	ng that the	Check	Debtor is not if: Debtor's agg	a small busin	debtor as defin ness debtor as d	lefined in 11 U	C. § 101(51I J.S.C. § 101(cluding debts	(51D).	ders or affiliates) se years thereafter).
Filing Fee waiver reattach signed applica					St		ng filed with of the plan w	this petition. vere solicited pr S.C. § 1126(b).	epetition from	one or more	e classes of cre	editors,
Statistical/Administr Debtor estimates t Debtor estimates t there will be no fu	hat funds wil hat, after any	l be available exempt prop	erty is ex	cluded and	administra		es paid,		THIS	SPACE IS I	FOR COURT	USE ONLY
Estimated Number of 1- 50- 49 99	Creditors 100- 199	200-] 1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000				
Estimated Assets So to \$50,001 t \$50,000	o \$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 o \$10 nillion	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					
Estimated Liabilities	o \$100,001 to \$500,000	\$500,001 S to \$1	31,000,001 o \$10 nillion	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					

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B1 (Official Form 1)(04/13) Page 2 Name of Debtor(s): **Voluntary Petition** Gualtieri, Susan M. (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ W. Mark Jump July 23, 2015 Signature of Attorney for Debtor(s) (Date) W. Mark Jump 0062837 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

B1 (Official Form 1)(04/13)

Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Susan M. Gualtieri

Signature of Debtor Susan M. Gualtieri

X.

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

July 23, 2015

Date

Signature of Attorney*

X /s/ W. Mark Jump

Signature of Attorney for Debtor(s)

W. Mark Jump 0062837

Printed Name of Attorney for Debtor(s)

Jump Legal Group, LLC

Firm Name

2130 Arlington Ave. Columbus, OH 43221

Address

(614) 481-4480

Telephone Number

July 23, 2015

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Gualtieri, Susan M.

Signatures

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

 \mathbf{X}

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Southern District of Ohio

In re	Susan M. Gualtieri		Case No.	
		Debtor(s)	Chapter	13
				•

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

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1D (Official Form 1, Exhibit D) (12/09) - Cont. Page 2					
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, of through the Internet.); ☐ Active military duty in a military combat zone.					
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.					
I certify under penalty of perjury that the information provided above is true and correct.					
Signature of Debtor: /s/ Susan M. Gualtieri Susan M. Gualtieri					
Date: July 23, 2015					

Document Page 6 of 55

Certificate Number: 02114-OHS-CC-025868463



02114-OHS-CC-025868463

CERTIFICATE OF COUNSELING

I CERTIFY that on July 13, 2015, at 05:44 o'clock PM EST, Susan Gualtieri received from Consumer Credit Counseling Service of Greater Atlanta d/b/a ClearPoint Credit Counseling Solutions, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Southern District of Ohio, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: July 13, 2015 By: /s/Eric Dina

Name: Eric Dina

Title: Customer Service

*Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy code are required to file within the United States Bankruptcy Court a complete certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521 (b).

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B6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Southern District of Ohio

In re	Susan M. Gualtieri		Case No		
-		Debtor	.,		
			Chapter	13	
			•		

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	57,700.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		13,054.31	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	5		99,268.62	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	3			4,900.63
J - Current Expenditures of Individual Debtor(s)	Yes	2			4,800.63
Total Number of Sheets of ALL Schedu	ıles	20			
	To	otal Assets	57,700.00		
			Total Liabilities	112,322.93	

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B 6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Southern District of Ohio

In re	Susan M. Gualtieri		Case No	
_		Debtor	•	
			Chapter	13
			-	

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	13,054.31
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	74,019.39
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	87,073.70

State the following:

Average Income (from Schedule I, Line 12)	4,900.63
Average Expenses (from Schedule J, Line 22)	4,800.63
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	6,872.37

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	13,054.31	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		99,268.62
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		99,268.62

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B6A (Official Form 6A) (12/07)

In re	Susan M. Gualtieri	Case No	
-		Debtor	

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property Joint, or Community

Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00**

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re	Susan M. Gualtieri	Case No.	_
_		Debtor	

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	Х		
2.	Checking, savings or other financial	HSA	-	200.00
	accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Checking (PNC) Joint with non filing spouse	J	300.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Household Goods	-	6,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	x		
6.	Wearing apparel.	Clothing	-	500.00
7.	Furs and jewelry.	Wedding ring	-	700.00
8.	Firearms and sports, photographic, and other hobby equipment.	x		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	Group Life with employer	-	0.00
10	Annuities. Itemize and name each issuer.	x		
		T)	Sub-Tota Cotal of this page)	al > 7,700.00

2 continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Susan M. Gualtieri	Case No.
		,

Debtor

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	401k		-	50,000.00
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	x			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
		(°	Sub-Total Total of this page)	al > 50,000.00

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Susan M. Gualtieri	Case No.
		,

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
	Patents, copyrights, and other intellectual property. Give particulars.	Х			
	Licenses, franchises, and other general intangibles. Give particulars.	X			
	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	X			
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > (Total of this page)

0.00

Total > **57,700.00**

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B6C (Official Form 6C) (4/13)

In re	Susan M. Gualtieri	Case No.
_		Debtor

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafte
☐ 11 U.S.C. §522(b)(2)	with respect to cases commenced on or after the date of adjustment.)
■ 11 U.S.C. §522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption	
Checking, Savings, or Other Financial Accounts, C		222.22	200.00	
HSA	Ohio Rev. Code Ann. § 2329.66(A)(3)	200.00	200.00	
Checking (PNC) Joint with non filing spouse	Ohio Rev. Code Ann. § 2329.66(A)(3) Ohio Rev. Code Ann. § 2329.66(A)(18)	250.00 50.00	300.00	
<u>Household Goods and Furnishings</u> Household Goods	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	6,000.00	6,000.00	
Wearing Apparel Clothing	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	500.00	500.00	
Furs and Jewelry Wedding ring	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)	700.00	700.00	
Interests in IRA, ERISA, Keogh, or Other Pension of 401k	or Profit Sharing Plans Ohio Rev. Code Ann. § 2329.66(A)(10)(b)	50,000.00	50,000.00	

Total:	57.700.00	57.700.00

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B6D (Official Form 6D) (12/07)

In re	Susan M. Gualtieri	Case No.
-		Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

	_		<u> </u>					
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	COXH-ZGEZH	UNLIQUIDA	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.				Т	E			
				Н	D	Н		
			Value \$					
Account No.			v alue φ	Н		Н		
Account No.								
			Value \$					
Account No.								
			Value \$					
Account No.			γ and c ψ	H		Н		
Account ivo.								
			Value \$			Ц		
continuation sheets attached				ubt		- 1		
Communication should attached			(Total of the	is p	oag	ge)		
					ota	- 1	0.00	0.00
			(Report on Summary of Sc	hed	ule	s)		

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B6E (Official Form 6E) (4/13)

In re	Susan M. Gualtieri	Case I	No
_		Debtor ,	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do

so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be

liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Subtotals" on each sheet. Report the total of claims listed on this Schedule E in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. \S 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
■ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federa Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6E (Official Form 6E) (4/13) - Cont.

In re	Susan M. Gualtieri	Case No	
-		Debtor ,	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community UNLIQUIDATED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CONTINGENT CREDITOR'S NAME, AND MAILING ADDRESS Н **AMOUNT** DATE CLAIM WAS INCURRED W INCLUDING ZIP CODE, AND CONSIDERATION FOR CLAIM OF CLAIM C AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER (See instructions.) 2006 Account No. Taxes Internal Revenue Service 0.00 PO Box 7346 Philadelphia, PA 19101-7346 13,054.31 13,054.31 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 13,054.31 13,054.31 0.00 (Report on Summary of Schedules) 13,054.31 13,054.31

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B6F (Official Form 6F) (12/07)

In re	Susan M. Gualtieri	Case No	
-		Debtor ,	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

check and con it decice has no electron nothing and con-			no to report on and senedare 1.				
CREDITOR'S NAME,	C	Ηι	usband, Wife, Joint, or Community	C	U N	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	J M H	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETORE SO STATE	CONTINGEN	ļ۷	SPUT	AMOUNT OF CLAIM
Account No.			Collection	T T	D A T E D		
Capital One c/o FirstSource 205 Bryant Woods South Buffalo, NY 14228		-			D		2,646.18
Account No.	t	H	Cash Advance	+	┢		
Cashnet USA 175 West Jackson Suite 1000 Chicago, IL 60604		-					1,200.00
Account No.	t		Credit Card	T			
Catherines c/o Comenity Bank PO BOX 182125 Columbus, OH 43218-2125		-					400.00
Account No.	t	H	Medical Bill	+			
Central Ohio Primary Care PO BOX 713659 Cincinnati, OH 45271-3659		-					
							353.80
			(Total of t	Subt			4,599.98

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B6F (Official Form 6F) (12/07) - Cont.

In re	Susan M. Gualtieri	Case No	
_		Debtor	

	I c	Гни	sband, Wife, Joint, or Community	l c	ш	Гп	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	L I Q	DISPUTED	AMOUNT OF CLAIM
Account No.	1		Taxes	T	E		
City of Columbus City Income Tax Division 50 W. Gay Street, 4th Floor Columbus, OH 43215		-			D		3,100.00
Account No.	t		Credit Card				
Credit One Bank PO BOX 60500 City Of Industry, CA 91716-0500		-					319.12
Account No.	╁	┝	Credit Card	-			
Giant Eagle PO BOX 182125 Columbus, OH 43218-2125		-					815.73
Account No.	t		Student Loan				
Great Lakes Educational Loan Services PO Box 3059 Milwaukee, WI 53201-3059		-					43,899.11
Account No.	╁		Cash Advance	+	\vdash	_	,
Great Plains Lending Attention: Customer Service 1050 E. 2nd St. Box 500 Edmond, OK 73034		-					1,300.00
Sheet no1 _ of _4 _ sheets attached to Schedule of		_		Sub			49,433.96
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	49,433.90

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B6F (Official Form 6F) (12/07) - Cont.

In re	Susan M. Gualtieri	Case No.	
_		Debtor	

				_		_	
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U N	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	A A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONT - NGEN	QULD	S P U T E	AMOUNT OF CLAIM
Account No.			2008, 2009	T	A T E D		
Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346		-	Taxes		D		7,495.68
Account No.			Credit Card				
JCP c/o Synchrony Bank PO BOX 965064 Orlando, FL 32896-5064		-					
							444.68
Account No.			Credit Card				
Kohl's PO BOX 2983 Milwaukee, WI 53201-2983		-					367.81
Account No.	┢	\vdash	Cash Advance	\vdash			
Max Lend PO BOX 639 Parshall, ND 58770		-					400.00
Account No.	T	T	Credit Card	T			
Merrick Bank PO Box 5721 Hicksville, NY 11802-5721		-					2,137.81
Sheet no. 2 of 4 sheets attached to Schedule of				Sub			10,845.98
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	

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B6F (Official Form 6F) (12/07) - Cont.

In re	Susan M. Gualtieri	Case No.	_
	·	Debtor	

	Ic	ш.,	sband, Wife, Joint, or Community	16		Ь	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W	DATE CLANAWAC INCUIDED AND	CONFINGERF	M-J>D-LZC		AMOUNT OF CLAIM
Account No.			Cash Advance	T	T E D		
Money Key 3422 Old Capital Trail Suite 1613 Wilmington, DE 19808		-			D		500.00
Account No.			Medical Bill				
Ohio Health Riverside Methodist Hospital 5350 Frantz Rd. Dublin, OH 43016		-					
	┸	L					2,180.24
Account No. Ohio Health Physician Group 5350 Frantz Rd. Attn: OPG Billing Dublin, OH 43016-4259		-	Medical Bill				246.11
Account No.	╁		Credit Card	\dagger			
The Avenue c/o Comenity Bank PO BOX 182125 Columbus, OH 43218-2125		-					456.39
Account No.	+	\vdash	Medical Bill	+	\vdash		.55.55
The OSU Wexner Medical Center 660 Ackerman Rd. PO BOX 183102 Columbus, OH 43218-3102		-					885.68
Sheet no. 3 of 4 sheets attached to Schedule of		<u> </u>		Sub	tota	 1	
Creditors Holding Unsecured Nonpriority Claims			(Total of				4,268.42

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B6F (Official Form 6F) (12/07) - Cont.

In re	Susan M. Gualtieri	Case No.	
_		Debtor	

	_			_	_	_	T
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLLQULDAF	DISPUTED	AMOUNT OF CLAIM
Account No.			Student Loans		E		
US Dept of Education Po Box 4222 Iowa City, IA 52244		-					30,120.28
Account No.				+	+	T	
Account No.	Н			+	╁	\vdash	
Account No.							
Account No.							
Sheet no. <u>4</u> of <u>4</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this			30,120.28
			(Report on Summary of S		Γota dule		99,268.62

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B6G (Official Form 6G) (12/07)

_			
In re	Susan M. Gualtieri	Case No.	
_		Debtor	

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 2:15-bk-54768 Doc 1 Filed 07/23/15 Entered 07/23/15 09:34:40 Desc Main Document Page 23 of 55

B6H (Official Form 6H) (12/07)

In re	Susan M. Gualtieri	Case No.	
- III IC	Ousair M. Ouaitieri		
		Debtor	

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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Fill	in this information to identify your	2350.				1				
	btor 1 Susan M. G									
_	otor 2 buse, if filing)									
Uni	ted States Bankruptcy Court for the	e: SOUTHERN DISTRIC	CT OF OHIO							
(If kr	se number					☐ A su	amended upplemen	t showi	ng post-petition of following date:	chapter
	fficial Form B 6I					MM	/ DD/ YY	YY		
	chedule I: Your Inc									12/13
atta	use. If you are separated and you che a separate sheet to this form. tt: Describe Employment Fill in your employment	On the top of any additi	onal pages, write yo			d case num	nber (if kr	nown).	Answer every o	
	information.		Debtor 1		_	Debtor 2 or non-filing spouse				
	If you have more than one job, attach a separate page with	Employment status	■ Employed				■ Employed			
	information about additional		☐ Not employed				☐ Not employed			
	employers.	Occupation	Pensions Specia	alist		S	eafood	Prepa	ration	
	Include part-time, seasonal, or self-employed work.	Employer's name	Nationwide Life Insurance Co.				o. Tamarkin Company			
Occupation may include student Employer's addres or homemaker, if it applies.		Employer's address	One Nationwide Columbus, OH 4			101 Kappa Drive Pittsburgh, PA 15238				
		How long employed t	here? 17 years	s			<u>8 y</u>	ears		
Pai	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to r	eport fo	any	line, write \$	0 in the s	space. I	nclude your non	-filing
-	ou or your non-filing spouse have me e space, attach a separate sheet to		ombine the informatio	n for all	empl	oyers for th	at person	on the	lines below. If y	ou need
						For Debto			ebtor 2 or ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	4,17	74.19	\$	3,380.72	
3.	Estimate and list monthly over	time pav.		3.	+\$		0.00	+\$	0.00	

4,174.19

3,380.72

Calculate gross Income. Add line 2 + line 3.

Debt	or 1 _	Susan M. Gualtieri	_	C	Case number (if know	n)			
					For Debtor 1		For Do	btor 2 or	
					FOI DEDIOI I			ing spouse	
	Conv	y line 4 here	4.	-	\$ 4,174.1	9	\$	3.380.72	
		,				Ť	Ť	0,0002	•
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$ 534.3	0	\$	708.56	
	5b.	Mandatory contributions for retirement plans	5b.		\$ 0.0	0	\$	0.00	•
	5c.	Voluntary contributions for retirement plans	5c.		\$ 289.1	6	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.		\$ 633.1	7	\$	0.00	
	5e.	Insurance	5e.		\$ 139.7	' 5	\$	105.13	•
	5f.	Domestic support obligations	5f.		\$ 0.0	0	\$	0.00	
	5g.	Union dues	5g.		\$ 0.0	0	\$	0.00	
	5h.	Other deductions. Specify: Parking	5h	+	\$ 56.3	3 -	+ \$	0.00	
		Group Life/Group Accident			\$ 8.6	9	\$	0.00	
		STD			\$ 12.3	9	\$	33.45	
		HSA			\$ 81.2	25	\$	0.00	
		Hyatt Legal Service			\$ 18.0	1	\$	0.00	
		Spouse Group Life/Group Accident			\$3.1	9	\$	0.00	
		Met Life Accident Ins./Critical Illness			\$	0	\$	30.90	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	:	\$ 1,776.2	24	\$	878.04	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	:	\$ 2,397.9	5	\$	2,502.68	
8.	List	all other income regularly received:							
	8a.	Net income from rental property and from operating a business,							
		profession, or farm							
		Attach a statement for each property and business showing gross							
		receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$ 0.0	n	\$	0.00	
	8b.	Interest and dividends	8b.		\$ 0.0	_	\$	0.00	-
	8c.	Family support payments that you, a non-filing spouse, or a dependen			Ψ <u> </u>		Ψ	0.00	-
	00.	regularly receive							
		Include alimony, spousal support, child support, maintenance, divorce							
		settlement, and property settlement.	8c.		\$0.0	0	\$	0.00	
	8d.	Unemployment compensation	8d.		\$	0	\$	0.00	
	8e.	Social Security	8e.		\$	0	\$	0.00	•
	8f.	Other government assistance that you regularly receive							
		Include cash assistance and the value (if known) of any non-cash assistance	e						
		that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.							
		Specify:	8f.		\$ 0.0	0	\$	0.00	
	8g.	Pension or retirement income	8g.		\$ 0.0		\$	0.00	-
	8h.	Other monthly income. Specify:	8h			0 -	+ \$	0.00	-
			_	_	·	Ĭ	_		-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.0	0	\$	0.00	
				L					
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$	ß	2,397.95 +	\$	2,502	.68 = \$	4,900.63
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	, ,	_	2,007.00	_			4,000.00
4.4									
11.		e all other regular contributions to the expenses that you list in Schedul de contributions from an unmarried partner, members of your household, you		nd	ents vour roomm	ate	s and		
		r friends or relatives.	и чоро		onto, your roomin	iaio	s, and		
	Do n	ot include any amounts already included in lines 2-10 or amounts that are no	t availa	able	e to pay expenses	s list	ed in Sch	nedule J.	
	Spec	cify:						11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Cert							
	appli		alli Lia	IIIIII	iles and Related	Date	<i>1,</i> 11 11	12. \$	4,900.63
	арріі								
								Combin	
13.	Do v	ou expect an increase or decrease within the year after you file this form	n?					monthly	y income
١٥.	БО У	No.							
	_		1 ^			1			1 .
		Yes. Explain: Note: Husband's income is an average of the p	ast 6 i	mc	ontns because	nıs	, nours \	<i>r</i> ary each w	reek.

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T=:II	in this informer	ation to identify						
FIII	in this informa	ation to identify y	our case:					
Deb	tor 1	Susan M. Gu	ıaltieri				ck if this is:	
Deb	tor 2					_	An amended filing	wing post-petition chapter
	ouse, if filing)							the following date:
Unite	ed States Bankı	ruptcy Court for the:	SOUTH	IERN DISTRICT OF OHIO		-	MM / DD / YYYY	
					_			
	e number nown)						A separate filing fo 2 maintains a sepa	or Debtor 2 because Debtor arate household
Of	fficial Fo	orm B 6J						
_		J: Your	_ Evnor	NCOC				40/40
				ISES . If two married people a	ra filing tagathar b	-4h ava avı	ally reenensible f	12/13
info	ormation. If m		eded, atta	ch another sheet to this				
Par	t 1: Desc	ribe Your House	ehold					
١.	_							
	■ No. Go to		in a separ	ate household?				
		lo						
	□Y	es. Debtor 2 mu	st file a sep	oarate Schedule J.				
2.	Do you hav	e dependents?	■ No					
	Do not list D		☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents'	' names.						☐ Yes
								□ No
							_	☐ Yes
								□ No
								☐ Yes ☐ No
								☐ No ☐ Yes
3.	Do vour exi	penses include	_	No				□ Tes
	expenses of	f people other t	han $_{m \Box}$	Yes				
	yourself an	d your depende	nts?	163				
Par	t 2: Estim	nate Your Ongoi	ng Month	ly Expenses				
exp		a date after the		uptcy filing date unless y y is filed. If this is a supp				apter 13 case to report of the form and fill in the
Incl	lude expense	es paid for with	non-cash	government assistance i	f vou know			
the	value of suc	h assistance an		cluded it on Schedule I:			Your exp	enses
(On	ficial Form 6I	l.)					Tour exp	Ciloco
4.		or home owners nd any rent for th		ses for your residence. I or lot.	nclude first mortgage	e 4. \$		1,109.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
		erty, homeowner's	s, or renter	's insurance		4b. \$		0.00
	•	•		upkeep expenses		4c. \$		150.00
_		eowner's associa				4d. \$		0.00
5.	Additional i	mortgage paym	ents for yo	our residence, such as ho	me equity loans	5. \$	i	0.00

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Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	350.00
6b. Water, sewer, garbage collection	6b.		79.63
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	·	250.00
6d. Other. Specify: Internet & Cable	6d.		135.00
Food and housekeeping supplies	7.	\$	850.00
Childcare and children's education costs	8.	\$	0.00
Clothing, laundry, and dry cleaning	9.	\$	150.00
Personal care products and services	10.		100.00
	10.		
·	11.	Ψ	125.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12.	\$	475.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
Charitable contributions and religious donations	14.	*	80.00
Insurance.	14.	Ψ	80.00
Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15b.	· .	0.00
15c. Vehicle insurance	15b. 15c.		170.00
	15d.		
15d. Other insurance. Specify:	150.	»	0.00
 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 	16.	¢	0.00
Installment or lease payments:	10.	Ψ	0.00
17a. Car payments for Vehicle 1	17a.	2	0.00
17b. Car payments for Vehicle 2	17b.	·	0.00
47a Other Creeks			
17c. Other Specify:	17c.		0.00
17d. Other. Specify:	17d.	a	0.00
Your payments of alimony, maintenance, and support that you did not report		\$	0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I)).	\$	
Other payments you make to support others who do not live with you. Specify:	19.	Ψ	0.00
Other real property expenses not included in lines 4 or 5 of this form or on 5		our Incomo	
20a. Mortgages on other property	20a.		0.00
20b. Real estate taxes	20b.		0.00
20c. Property, homeowner's, or renter's insurance	20c.		0.00
20d. Maintenance, repair, and upkeep expenses	20d.	· .	0.00
20e. Homeowner's association or condominium dues	20e.		0.00
. Other: Specify: Non filing spouse credit card payment	21.	+\$	60.00
Non filing spouse car payment #1		+\$	347.00
Non filing spouse car payment #2		+\$	370.00
Your monthly expenses. Add lines 4 through 21.	22.	\$	4,800.63
The result is your monthly expenses.	22.	Ψ	4,000.03
Calculate your monthly net income.			
23a. Copy line 12 <i>(your combined monthly income)</i> from Schedule I.	23a.	\$	4,900.63
23b. Copy your monthly expenses from line 22 above.	23a. 23b.		4,800.63
200. Copy your monthly expenses normality 22 above.	۷۵۵.	-φ	4,000.03
23c. Subtract your monthly expenses from your monthly income.			
The result is your <i>monthly net income</i> .	23c.	\$	100.00
	ļ		
. Do you expect an increase or decrease in your expenses within the year after			
For example, do you expect to finish paying for your car loan within the year or do you expect you	our mortgage pa	yment to increa	se or decrease because of a
modification to the terms of your mortgage?			
■ No.			
☐ Yes.			
Explain:			

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B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court

Southern District of Ohio

In re	Susan M. Gualtieri			Case No.	
			Debtor(s)	Chapter	13
	DECLARATION	CONCERN	NING DEBTOR	'S SCHEDUL	ES
	DECLARATION UNDER	R PENALTY (OF PERJURY BY I	NDIVIDUAL DEI	BTOR
	I declare under penalty of perjury				es, consisting of22
	sheets, and that they are true and correct to	the best of m	y knowledge, inform	nation, and belief.	
Date _	July 23, 2015	Signature	/s/ Susan M. Gua		
			Susan M. Gualtie	ri	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Debtor

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B7 (Official Form 7) (04/13)

United States Bankruptcy Court Southern District of Ohio

In re	Susan M. Gualtieri		Case No.	
		Debtor(s)	Chapter	13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$49,517.88 YTD Employment \$71,758.00 2014 Employment \$75,156.00 2013 Employment

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

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3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR VALUE OF TRANSFERS

AMOUNT STILL OWING

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION Our Lady of Victory RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

Church \$10.00 weekly \$520.00

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

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DATE OF PAYMENT, AMOUNT OF MONEY
NAME AND ADDRESS
OF PAYEE
OF PAYEE
THAN DEBTOR
OF PROPERTY
CredAbility

AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
OF PROPERTY
\$25.00; Credit Counseling

100 Edgewood Ave Suite 1800 Atlanta, GA 30303

Jump Legal Group, LLC 2130 Arlington Ave. Columbus, OH 43221 7/2015 \$200.00; Legal Fees

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

Unrelated Third Party

DATE **12/16/2014** DESCRIBE PROPERTY TRANSFERRED
AND VALUE RECEIVED
1348 Sandrell Dr, Columbus, Ohio 43228

None

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled

trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS

NAME USED

DATES OF OCCUPANCY

1348 Sandrell Drive, Columbus, Ohio 43228

Susan M. Guallieri

4/2005 - 12/2014

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

SITE NAME AND ADDRESS

GOVERNMENTAL UNIT

NOTICE

LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

SITE NAME AND ADDRESS

GOVERNMENTAL UNIT

NOTICE

LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND

NAME

NATURE OF BUSINESS **ENDING DATES**

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

ADDRESS NAME

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

None

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

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B7 (Official Form 7) (04/13)

7

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

None

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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B7 (Official Form 7) (04/13)

Ω,

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	July 23, 2015	Signature	/s/ Susan M. Gualtieri
			Susan M. Gualtieri
			Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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LBR Form 2016-1(b)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

In re: Susan M. Gualtieri		Case No.
oudan iii. Oudinon		Chapter 13
	Debtor(s)	Judge

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR AND APPLICATION FOR ALLOWANCE OF FEES IN CHAPTER 13 CASE

I.

I.	Disclosure		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I am the that compensation paid to me within one year before the filing of the petition in I services rendered or to be rendered on behalf of the debtor(s) in contemplation of or follows:	oankruptcy, or ag	reed to be paid to me, for
	For legal services, I have agreed to accept	\$	3,500.00
	Prior to the filing of this statement I have received	\$	200.00
	Balance Due	\$	3,300.00
2.	The source of the compensation paid to me was: ■ Debtor □ Other (specify):		
3.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
4.	■ I have not agreed to share the above-disclosed compensation with any other person associates of my law firm.	ns unless they are	members and/or
	☐ I have agreed to share the above-disclosed compensation with another person or p of my law firm. A copy of the agreement, together with a list of the names of the attached.		

Application II.

- I hereby apply for an allowance of fees in the amount set forth above. I understand and agree that the Court may approve, without itemization, an allowance of fees not to exceed \$3,500, for rendering the legal services set forth below. If I seek payment of fees in excess of \$3,500, I will file a separate application that sets forth the total amount of the fee requested, and that includes an itemization of all legal services performed, the hourly rate at which the services were performed, and the actual time spent by the case attorney, any other attorney, paralegal or professional person for whom fees are sought. Any request for reimbursement of expenses shall include an itemization of the expenses.
 - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether, and under what chapter, to file a petition in bankruptcy;
 - Preparation and filing of any petition, schedules, statement of affairs and amendments thereto that may be required; b.
 - Preparation and filing of chapter 13 plan, and any pre-confirmation amendments thereto that may be required; c.
 - Preparation and filing of payroll orders and amended payroll orders; d.
 - Representation of the debtor at the meeting of creditors and confirmation hearing; and any continued hearings thereof; e.
 - Filing of address changes; f.
 - Routine phone calls and questions; g.
 - Review of claims: h.
 - Review of notice of intention to pay claims; i.
 - Preparation and filing of objections to non-real estate and non-tax claims; j.

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- k. Preparation and filing of first motion to suspend or reduce payments;
- 1. Preparation and filing of debtor's certification regarding issuance of discharge order; and
- m. Any other duty as required by local decision or policy.
- 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation in adversary proceedings, motions to avoid liens, motions to redeem, and amending schedules to include additional creditors.

July 23, 2015	/s/ W. Mark Jump	
Date	W. Mark Jump	
	Signature of Attorney 0062837 Jump Legal Group, LLC	
	2130 Arlington Ave.	
	Columbus, OH 43221	
	(614) 481-4480	

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy forms.html#procedure.

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B 201B (Form 201B) (12/09)

United States Bankruptcy Court Southern District of Ohio

		Southern District of Ohio	0		
In re	Susan M. Gualtieri		Case No.		
		Debtor(s)	Chapter	13	
		OF NOTICE TO CONS 42(b) OF THE BANKRU		R(S)	
Code.	I (We), the debtor(s), affirm that I (we) has	Certification of Debtor ave received and read the attached	ed notice, as required l	by § 342(b) of the Bar	nkruptcy
Susar	n M. Gualtieri	X /s/ Susan	M. Gualtieri	July 23, 201	5
Printe	d Name(s) of Debtor(s)	Signature	of Debtor	Date	
Case N	No. (if known)	X			
		Signature of	of Joint Debtor (if any) Date	

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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c/o FirstSource c/Documenton Page 42 of 55
205 Bryant Woods South
Buffalo, NY 14228 C/Document on Page 42 of 55
PO BOX 965064
Orlando, FL 32896-5064

Cashnet USA 175 West Jackson Suite 1000 Chicago, IL 60604

Kohl's PO BOX 2983 Milwaukee, WI 53201-2983

Catherines c/o Comenity Bank PO BOX 182125 Columbus, OH 43218-2125

Max Lend PO BOX 639 Parshall, ND 58770

Central Ohio Primary Care Merrick Bank PO BOX 713659 PO Box 5721 Cincinnati, OH 45271-3659 Hicksville, NY 11802-5721

City of Columbus
City Income Tax Division
50 W. Gay Street, 4th Floor
Suite 1613 Columbus, OH 43215 Wilmington, DE 19808

Credit One Bank Ohio Health
PO BOX 60500 Riverside Methodist Hospital City Of Industry, CA 91716-050050 Frantz Rd. Dublin, OH 43016

PO BOX 182125

Columbus, OH 43218-2125

5350 Frantz Rd.

Attn: OPG Billing

Giant Eagle Ohio Health Physician Group PO BOX 182125 5350 Frantz Rd Dublin, OH 43016-4259

Great Lakes Educational Loan ShevAvesue PO Box 3059 c/o Comenity Bank Milwaukee, WI 53201-3059 PO BOX 182125 Columbus, OH 43218-2125

1050 E. 2nd St. Box 500 PO BOX 183102 Edmond, OK 73034 Columbus, OH 43218-3102

Great Plains Lending The OSU Wexner Medical Center Attention: Customer Service 660 Ackerman Rd.

Internal Revenue Service US Dept of Education PO Box 7346 Po Box 4222 Philadelphia, PA 19101-7346 Iowa City, IA 52244

Fill in this information to identify your case:				
Debtor 1 Susan M. Gualtieri				
Debtor 2 (Spouse, if filing)			
United States Bankruptcy Court for the: Southern District of Ohio				
Case number (if known)				

Check as directed in lines 17 and 21:							
According to the calculations required by this Statement:							
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
-	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

Official Form 22C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

COI	diffir only. If you have nothing to report for any line, with	ie ao ii	i tile spa	CC.					
					Colui Debt		Debt	mn B or 2 or filing spouse	
	Your gross wages, salary, tips, bonuses, overtime, all payroll deductions).	and co	ommissi	ons (before	\$	4,268.65	\$	3,380.72	
	Alimony and maintenance payments. Do not include Column B is filled in.	payme	ents from	a spouse if	\$	0.00	\$	0.00	
1	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	Includ , your	le regula depende	r contributions ents, parents,	\$	0.00	\$	0.00	
5. I	Net income from operating a business, profession,	or farı	n						
(Gross receipts (before all deductions)	\$	0.00						
(Ordinary and necessary operating expenses	-\$	0.00						
ı	Net monthly income from a business, profession, or far	m \$ _	0.00	Copy here ->	\$	0.00	\$	0.00	
(Net income from rental and other real property Gross receipts (before all deductions) Ordinary and necessary operating expenses	\$_ -\$	0.00						
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	0.00	

Official Form 22C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Debtor 1	Susan M. Gualtieri		Case number	(if known)			
			Column A Debtor 1		Column B Debtor 2 o non-filing		
7. In	nterest, dividends, and royalties		\$	0.00	\$	0.00	
	nemployment compensation		\$	0.00	\$	0.00	
	o not enter the amount if you contend that the amount received was a be nder the Social Security Act. Instead, list it here:	nefit					
	For you \$	0.00					
		0.00					
	ension or retirement income. Do not include any amount received that enefit under the Social Security Act.	was a	\$	0.00	\$	0.00	
D re de	ncome from all other sources not listed above. Specify the source and to not include any benefits received under the Social Security Act or paymeceived as a victim of a war crime, a crime against humanity, or internation omestic terrorism. If necessary, list other sources on a separate page and tall on line 10c.	nents nal or					
	10a		\$	0.00	\$	0.00	
	10b		\$	0.00	\$	0.00	
	10c. Total amounts from separate pages, if any.	-	+ \$	0.00	\$	0.00	
	ralculate your total average monthly income. Add lines 2 through 10 fo ach column. Then add the total for Column A to the total for Column B.	s	4,268.65	+ \$ _	3,380.72		7,649.37
Part 2:	Determine How to Measure Your Deductions from Income					1110	nuny moone
12. C 13. C	opy your total average monthly income from line 11. calculate the marital adjustment. Check one: You are not married. Fill in 0 on line 3d.					\$	7,649.37
	You are married and your spouse is filing with you. Fill in 0 in line 13d	l.					
	You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was it dependents, such as payment of the spouse's tax liability or the spouse.						
	In lines 13a-c, specify the basis for excluding this income and the amadjustments on a separate page.	ount of ir	ncome devoted	l to each	purpose. If ne	cessary,	list additional
	If this adjustment does not apply, enter 0 on line 13d.	_	347.00	n			
	13a. Non filing spouse car payment #1 13b. Non filing spouse car payment #2	\$_	370.00	_			
	13b. Non filing spouse car payment #2 Non filing spouse credit card payment	\$_ \$	60.00				
	13d. Total	\$_	777.00		ppy here=> 13d	l	777.00
14. `	Your current monthly income. Subtract line 13d from line 12.				14.	\$	6,872.37
	Calculate your current monthly income for the year. Follow these ste	•					C 072 27
	15a. Copy line 14 here=>				15a	· \$	6,872.37
	Multiply line 15a by 12 (the number of months in a year).					x 1	12
	15b. The result is your current monthly income for the year for this part of	of the for	m.		15b	. \$8	32,468.44

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Debt	or 1	Susan M. Gualtieri Case number (if k	known)		
16	. Cal	culate the median family income that applies to you. Follow these steps:			
		a. Fill in the state in which you live.			
		·			
		p. Fill in the number of people in your household.			54 400 00
	16c	c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the sepainstructions for this form. This list may also be available at the bankruptcy clerk's office.		\$	54,420.00
17	. Hov	w do the lines compare?			
	17a	a. ☐ Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income			not determined under
	17b	Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposab</i> 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Forn current monthly income from line 14 above.			
Par	t 3:	Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4)			
18.	Cop	py your total average monthly income from line 11 .	18.	\$	7,649.37
19.	con	duct the marital adjustment if it applies. If you are married, your spouse is not filing with you, ar tend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct process's income, copy the amount from line 13d.			
		ne marital adjustment does not apply, fill in 0 on line 19a.	19a.	-\$	777.00
	Sub	btract line 19a from line 18.	19b.	\$_	6,872.37
00	0-1	leaded accompany of the leaders for the constant of the consta			
20.		culate your current monthly income for the year. Follow these steps:	20a.	٥	6,872.37
	20a	a. Copy line 19b		Ţ	,
		Multiply by 12 (the number of months in a year).			x 12
	20b	b. The result is your current monthly income for the year for this part of the form	20b.	\$	82,468.44
	20c	c. Copy the median family income for your state and size of household from line 16c		\$	54,420.00
	21.	How do the lines compare?			
		☐ Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of period is 3 years. Go to Part 4.	of this form, check	(box	3, The commitment
		Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the to commitment period is 5 years. Go to Part 4.	op of page 1 of this	s form	n, check box 4, The
Par	t 4:	Sign Below			
	Bys	signing here, under penalty of perjury I declare that the information on this statement and in any a	ttachments is true	and	correct.
)	(/s/	/ Susan M. Gualtieri			
	Sı	usan M. Gualtieri gnature of Debtor 1			
	•	e July 23, 2015			
		MM/DD/YYYY			
	If yo	ou checked 17a, do NOT fill out or file Form 22C-2.			

If you checked 17b, fill out Form 22C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Fill in	this information to	identify your case:		
Debto	Susan M	Gualtieri		
Debto	r 2 se, if filing)			
United	States Bankruptcy C	Court for the: Southern District of Ohio		
Case r	number wn)		☐ Check if	this is an amended filing
	Pter 13 Cal	culation of Your Disposab	ole Income	12/14
	out this form, you w itment Period (Offic	ill need your completed copy of <i>Chapter 13</i> stial Form 22C-1).	Statement of Your Current Monthly in	ncome and Calculation of
space	is needed, attach a	ate as possible. If two married people are fili separate sheet to this form, Include the line i ur name and case number (if known).		
Part 1	Calculate You	Deductions from Your Income		
the	questions in lines 6	ervice (IRS) issues National and Local Stand -15. To find the IRS standards, go online usi e available at the bankruptcy clerk's office.		
exp	enses if they are high	ounts set out in lines 6-15 regardless of your acturer than the standards. Do not include any operation amounts that you subtracted from your sp	ating expenses that you subtracted from	income in lines 5 and 6 of Form
If yo	our expenses differ fro	om month to month, enter the average expense.		
Note	e: Line numbers 1-4	are not used in this form. These numbers apply	to information required by a similar form	n used in chapter 7 cases.
5.	The number of peo	ople used in determining your deductions fro	om income	
	plus the number of	people who could be claimed as exemptions or any additional dependents whom you support. The in your household.		2
Nati	ional Standards	You must use the IRS National Standards	to answer the questions in lines 6-7.	
6.		d other items: Using the number of people you dollar amount for food, clothing, and other item		\$1,092.00
7.	the dollar amount for people who are 65 of	th care allowance: Using the number of people or out-of-pocket health care. The number of people or olderbecause older people have a higher IR amount, you may deduct the additional amount.	ole is split into two categoriespeople w S allowance for health car costs. If you	ho are under 65 and

Official Form 22C-2

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Debtor 1	Susan M. Gualtieri	Case number (if known)	

People who are under 65 years of age	
7a. Out-of-pocket health care allowance per person	\$ <u>60</u>
7b. Number of people who are under 65	X2
7c. Subtotal. Multiply line 7a by line 7b.	\$120.00 Copy line 7c here=> \$120.00
People who are 65 years of age or older	
7d. Out-of-pocket health care allowance per person	\$ <u>144</u>
7e. Number of people who are 65 or older	x <u> </u>
7f. Subtotal. Multiply line 7d by line 7e.	\$ \$ Copy line 7f here=> \$ 0.00
7g. Total. Add line 7c and line 7f	\$ Copy total here=> 7g. \$ 120.00
bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expense housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trust separate instructions for this form. This chart may also	ogram has divided the IRS Local Standard for housing for es ee Program chart. To find the chart, go online using the link specified in the
fill in the dollar amount listed for your county for insuran	
9. Housing and utilities - Mortgage or rent expenses:	
 Using the number of people you entered in line 5, listed for your county for mortgage or rent expens 	
9b. Total average monthly payment for all mortgages	and other debts secured by your home.
To calculate the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.	
Name of the creditor	Average monthly payment
-NONE-	\$
9b. Total average monthly payme	ent \$ 0.00 Copy line 9b here=> -\$ 0.00 Repeat this amount on line 33a.
9c. Net mortgage or rent expense.	
Subtract line 9b (total average monthly payment) or rent expense). If this number is less than \$0, each	
affects the calculation of your monthly expenses, fi	on of the IRS Local Standard for housing is incorrect and ill in any additional amount you claim. \$
Explain why:	

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11.	Local transportation expenses: Check the number of veh	nicles for which	you claim an	ownership	o or operating	g expense.	
	■ 0. Go to line 14.						
	☐ 1. Go to line 12.						
	☐ 2 or more. Go to line 12.						
12.	Vehicle operation expense: Using the IRS Local Standard operating expenses, fill in the Operating Costs that apply for						0.00
	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles.						
Vel	Describe Vehicle 1:						
13a.	Ownership or leasing costs using IRS Local Standard		13a.	\$	0.00		
13b.	Average monthly payment for all debts secured by Vehicle Do not include costs for leased vehicles.	1.					
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mo bankruptcy. Then dived by 60.						
	Name of each creditor for Vehicle 1	Average mo	onthly				
		\$					
			Copy 13b here =>	· -\$	0.00		
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this amount is less than \$	SO enter \$0				Copy net Vehicle 1	
	Construct line 100 from line 100. If this difficult is 1000 than t	o, chici wo.	13c.	\$	0.00	expense here => \$	0.00
Vel	nicle 2 Describe Vehicle 2:						
13d.	Ownership or leasing costs using IRS Local Standard		13d.	\$	0.00		
13e.	Average monthly payment for all debts secured by Vehicle leased vehicles.	2. Do not includ	de costs for				
	Name of each creditor for Vehicle 2	Average mo	onthly				
		\$					
			Copy 13e here =>	· -\$	0.00		
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this number is less than \$	0.0 enter				Copy net Vehicle 2	
	Cobract line 100 from line 100. If this number is 1000 than t	ρο, eriter ψο.	13f.	\$	0.00	expense here => \$	0.00
14.	Public transportation expense: If you claimed 0 vehicles <i>Transportation</i> expense allowance regardless of whether you				rds, fill in the	Public \$	185.00
	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in not claim more than the IRS Local Standard for <i>Public Trar</i>	what you believ					0.00

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Oth	rer Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for				
16.	Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.	\$	1,301.89			
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement		·			
	contributions, union dues, and uniform costs.	æ	0.00			
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00			
18.	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$	0.00			
19.	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.					
	Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00			
20.	Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or	•	0.00			
	for your physically or mentally challenged dependent child if no public education is available for similar services.	\$	0.00			
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.	•	0.00			
	Do not include payments for any elementary or secondary school education.	\$	0.00			
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.					
	Payments for health insurance or health savings accounts should be listed only in line 25.	\$	0.00			
23.	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.					
	Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 22C-1, or any amount you previously deducted.	+\$	0.00			
24.	Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.	\$	4,363.89			
Add	ditional Expense Deductions These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24.					
25.	Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, o your dependents.	or				
	Health insurance \$ 244.88					
	Disability insurance \$ 45.84					
	Health savings account + \$ 81.25					
	Total \$ Copy total here=>	\$	371.97			
	Do you actually spend this total amount? No. How much do you actually spend?					
	Yes \$					
26.	Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.	\$	0.00			
27.	Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.					
	By law, the court must keep the nature of these expenses confidential.	\$	0.00			

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28. A	Susan M. Gualtieri	Case numb	er (<i>if known</i>)			
	Additional home energy costs. Your home allowance on line 8.	e energy costs are included in your non-mortgage	housing and util	lities		
		osts that are more than the home energy costs incide, then fill in the excess amount of home energy of				
	You must give your case trustee documenta amount claimed is reasonable and necessa	ation of your actual expenses, and you must show ry.	that the addition	nal	\$	0.00
\$		ren who are younger than 18. The monthly experiendent children who are younger than 18 years o				
	You must give your case trustee documenta claimed is reasonable and necessary and ne	ation of your actual expenses, and you must explain of already accounted for in lines 6-23.	in why the amou	ınt		
*	Subject to adjustment on 4/01/16, and eve	ry 3 years after that for cases begun on or after th	e date of adjust	ment.	\$	0.0
h		ne monthly amount by which your actual food and allowances in the IRS National Standards. That are in the IRS National Standards.				
		onal allowance, go online using the link specified i o be available at the bankruptcy clerk's office.	in the separate			
Y	ou must show that the additional amount o	laimed is reasonable and necessary.			\$	0.0
	Continuing charitable contributions. The nstruments to a religious or charitable organ	amount that you will continue to contribute in the fairzation. 11 U.S.C. § 548(d)3 and (4).	form of cash or	financial	\$	0.0
	Add all of the additional expense deductions Add lines 25 through 31.					
Dedu	ctions for Debt Payment					
	o calculate the total average monthly payme editor in the 60 months after you file for bar Mortgages on your home	ent, add all amounts that are contractually due to entractually du	each secured			monthly
33a.	Conviline 9h here			=>	payment	
oou.	Copy line 9b here					
	Loans on your first two vehicles				-	
224	Camer line 40h have				<u> </u>	0.00
33b.					\$	0.00
33b. 33c.					\$ \$	0.00
33c.				=> vment axes	\$	0.00
33c.	Copy line 13e here		Does pay include ta or insurar	=> vment axes	\$	0.00
33c. Name	Copy line 13e here		Does pay include to or insurar	=> vment axes nce?	\$	0.00
33c. Name	Copy line 13e here		Does pay include ta or insurar	=> vment axes nce?	\$	0.00
33c. Name	Copy line 13e here		Does pay include to or insurar	=> vment axes nce?	\$\$ \$\$	0.00
33c. Name	Copy line 13e here		Does pay include to or insurar	=> /ment axes nce?	\$	0.00
33c. Name	Copy line 13e here		Does pay include to or insurar No Yes No	=> /ment axes nce?	\$ \$ \$	0.00
33c. Name	Copy line 13e here		Does pay include to or insurar No Yes No	=> /ment axes nce?	\$ \$ \$	0.00
33c. Name	Copy line 13e here		Does pay include ta or insurar No Yes No Yes	=> vment axes nce?	\$ \$ \$	0.00
33c. Name	Copy line 13e here		Does pay include to or insurar No Yes No Yes No No	=> vment axes nce?	\$ \$ \$ \$	0.00

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Susan M. Gualtieri Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Identify property that secures the debt Name of the creditor **Total cure amount** Monthly cure amount -NONE-Copy total 0.00 0.00 Total here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. ☐ No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 13,054.31 217.57 ÷60 \$ 36. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total here=> Average monthly administrative expense 217.57 37. Add all of the deductions for debt payment. Add lines 33g through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 4,363.89 expense allowances Copy line 32, All of the additional expense deductions 371.97 Copy line 37, All of the deductions for debt payment 217.57 4,953.43 4,953.43 Total deductions Copy total here=>

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Debtor 1	Su	Susan M. Gualtieri Case number (if known)								
Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)										
			rent monthly income from line Current Monthly Income and (od		\$		6,872.37
((10. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 22C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. \$ 0.00									
41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19).										
42. 7	Total o	f all deduction	ons allowed under 11 U.S.C. §	707(b)(2)(A).	Copy line 38 here	=>	\$\$	3.43		
ŧ	43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.									
Des	cribe t	he special ci	rcumstances		Amount of exp	pen	se			
438	a				_ \$					
431	b				\$					
430	c				\$					
430	d. Tot	al. Add lines 4	43a through 43c.		\$0.00)	Copy 43d here=> \$	0.0	00_	
44. 1	Total a	djustments. /	Add lines 40 through 43d.		=>	\$	5,875.76	Copy to		5,875.76
	45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39.							996.61		
46. Change in income or expenses. If the income in Form 22C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 22C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.										
Form	า	Line	Reason for change		Date of chang	ge	Increase or decrease?	Amou	unt of change	
☐ 22 ☐ 22 ☐ 22 ☐ 22 ☐ 22 ☐ 22	2C-2 2C-1 2C-2 2C-1 2C-2	_					☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Decrease ☐ Decrease ☐ Increase	\$ \$ \$		-
☐ 22							_ Decrease	\$		_

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Debtor 1	Susan M. Gualtieri	Case number (if known)
Part 4:	Sign Below	
E	By signing here, under penalty of perjury you	declare that the information on this statement and in any attachments is true and correct.
	/s/ Susan M. Gualtieri	
	Susan M. Gualtieri Signature of Debtor 1	
Date	July 23, 2015 MM / DD / YYYY	

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Debtor 1 Susan M. Gualtieri Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 01/01/2015 to 06/30/2015.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Nationwide

Year-to-Date Income:

Total Year-to-Date Income: \$25,611.87 from check dated 6/30/2015 .

Average Monthly Income: **\$4,268.65**.

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Debtor 1 Susan M. Gualtieri Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **01/01/2015** to **06/30/2015**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Giant Eagle

Year-to-Date Income:

Total Year-to-Date Income: **\$20,284.29** from check dated **6/30/2015**

Average Monthly Income: \$3,380.72.